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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 |
| | ☐ Chapter 12 ☐ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Trena | |
| Write the name that is on | First name | First name |
| write the name that is on your government-issued | L Middle name | Middle name |
| picture identification (for example, your driver's | | Middle Harie |
| license or passport | McGregory Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last 8 years | First name | First name |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 1926 | |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| Debtor 1 Trena First Name | L Middle Name | McGregory Last Name | Case number (if known) |
|--|-----------------------|--|--|
| | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any | business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | | Business name |
| 8 years | Business name | | Business name |
| Include trade names and doing business as names | EIN | | EIN |
| | EIN | | EIN |
| 5. Where you live | 1905 S. 16th Ave | | If Debtor 2 lives at a different address: |
| | Number Street | | Number Street |
| | Broadview Illino | | |
| | City State | Zip Code | City State Zip Code |
| | County | | County |
| | | s is different from the one ote that the court will send any ling address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | | Number Street |
| | | | |
| | City | State Zip Code | City State Zip Code |
| Why you are choosing this district | Check one: | | Check one: |
| to file for bankruptcy | | ys before filing this petition, I hav nger than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason | n. Explain. (See 28 U.S.C. §§ 140 | 08.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | _ |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Trena | | L Mistalla Nassa | | McGregory | | Case number (if kno | <i></i> | |
|--|---|--|---|--|----------------|--|---|---|
| First Name | | Middle Nam | | Last Name | | | | |
| Part 2: Tell the Cou | ırt About You | r Bankrup | tcy Case | | | | | |
| The chapter of the Bankruptcy Code are choosing to the under | e you Bankr file Ch | | | | | uired by 11 U.S.C I check the appro | | ndividuals Filing for |
| 8. How you will pay fee | mo cas ma lind lind the you | ore details a shier's che ay pay with eed to pay dividuals to equest that dge may, be e official pour u choose t | where the entire fee when I file my petition. Please check with the clerk's office in your local court for rails about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, it check, or money order. If your attorney is submitting your payment on your behalf, your attorney with a credit card or check with a pre-printed address. To pay the fee in installments. If you choose this option, sign and attach the Application for rails to Pay Your Filing Fee in Installments (Official Form 103A). To that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a ray, but is not required to, waive your fee, and may do so only if your income is less than 150% of all poverty line that applies to your family size and you are unable to pay the fee in installments). If one this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official 3B) and file it with your petition. | | | | | |
| 9. Have you filed fo bankruptcy with last 8 years? | in the | O. S. District District District | Northern Dis | strict of Illinois strict of Illinois strict of Illinois | When When When | 4/2/2014 MM / DD / YYYY 11/22/2016 MM / DD / YYYY 2/3/2017 MM / DD / YYYY | Case number _ Case number _ Case number _ | 1:2014bk12309 1:2016bk37190 1:2017bk03156 |
| 10. Are any bankrup cases pending o being filed by a spouse who is no filing this case w you, or by a busin partner, or by an affiliate? | r Ye ot ith ness | D. Debtor District Debtor District | | | When When | MM / DD / YYYY | Relationship to Case number, Relationship to Case number, | you |
| 11. Do you rent your residence? | | ✓ No. | r landlord obt Go to line 12 | Statement Abou | | - | st You (Form 10 | 1A) and file it with |

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McGregory Debtor 1 Trena Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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McGregory Case number (if known)

Debtor 1 Trena First Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. My physical disability causes me to Disability. My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for

waiver of credit counseling with the court.

waiver of credit counseling with the court.

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| Debtor 1 Trena First Name | L McG Middle Name Last N | | umber (if known) | | |
|--|--|---|--|--|--|
| | | varrie | | | |
| Part 6: Answer These Que 16. What kind of debts do you have? 17. Are you filing under Chapter 7? Do you estimate that | "incurred by an individual pring No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily bus money for a business or investigation of the second of the se | ebts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as y an individual primarily for a personal, family, or household purpose." to line 16b. to line 17. ebts primarily business debts? Business debts are debts that you incurred to obtain a business or investment or through the operation of the business or investment. to line 16c. | | | |
| after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund No. | s will be available to distribut | e to unsecured creditors? | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mi \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50 | 10 s1,000,000,001-\$10 billion stillion s10,000,000,001-\$50 billion | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mi \$10,000,001-\$50 n \$50,000,001-\$100 \$100,000,001-\$50 | s1,000,000,001-\$10 billion stillion \$1,000,000,001-\$50 billion | | |
| Part 7: Sign Below | | | | | |
| For you | correct. If I have chosen to file under Chapt of title 11, United States Code. I ur under Chapter 7. | er 7, I am aware that I may nderstand the relief availab | erjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 13 le under each chapter, and I choose to proceed someone who is not an attorney to help me fill | | |
| | out this document, I have obtained | and read the notice requir | ed by 11 U.S.C. § 342(b). | | |
| | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | /s/ Trena McGregory | <u> </u> | | | |
| | Signature of Debtor 1 | | Signature of Debtor 2 | | |
| | Executed on 6/6/2018 MM / DD / Y | YYY | Executed on | | |

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| Debtor 1 Trena | L | McGregory | Case number (if k | (nown) |
|--|---------------------------|-----------------------|------------------------------|---|
| First Name | Middle Name | Last Name | <u> </u> | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 1 | 2, or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § | 342(b) and, in a case in w | hich § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the | information in the schedu | ules filed with the petition is incorrect. |
| attorney, you do not | . | | | · |
| need to file this page. | /s/ Yisroel Y Mosko | vits | Date | 6/6/2018 |
| | Signature of Attorney | for Debtor | MI | M / DD / YYYY |
| | | | | |
| | | | | |
| | Yisroel Y Moskovits | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 10 N. Martingale Road | d | | |
| | Street | • | | |
| | Suite 400 | | | |
| | | | | |
| | Schaumburg | | Illinois | 60173 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122543191 | Email address | imoskovits@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

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| Debtor 1 | Trena | L | McGregory | | Case number (if kno | own) | | |
|----------|-------------------------------------|---------------|-------------------------------|------|----------------------------|---------------|---------------|--|
| | First Name | Middle Nam | e Last Name | | | | | |
| | Additional Page | | | | | | | |
| 9. Have | you filed for cruptcy within the | ☐ No. | | | | | | |
| last 8 | 3 years? | Yes. District | Northern District of Illinois | When | 3/2/2018 MM / DD / YYYY | Case number _ | 1:2018bk06052 | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Trena | L | McGregory | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | (State) | | | | |
| Case number (If known) | | | | | | | |

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$8,133.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$8,133.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | 04.4.400.70 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$14,409.73 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$13,397.87 |
| Your total liabilities | \$27,807.60 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| . Schedule I: Your Income (Official Form 106I) | \$2,137.33 |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,647.00 |

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| Deb | otor 1 Trena | L | McGregory | Case number (if known) | | | | | | |
|-------------|--|--|---|---------------------------------------|------------|--|--|--|--|--|
| | First Name | Middle Name | Last Name | | | | | | | |
| Part | 4: Answer These Qu | uestions for Administrati | ve and Statistical Records | | | | | | | |
| 6. A | re you filing for bankrup | tcy under Chapters 7, 11, or | 13? | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | |
| [| Yes. | | | | | | | | | |
| 7. W | What kind of debt do you | have? | | | | | | | | |
| [| Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. | | | | | | | | | |
| | <u> </u> | rimarily consumer debts. You with your other schedules. | u have nothing to report on this pa | art of the form. Check this box and s | ubmit | | | | | |
| | | Cour Current Monthly Income Form 122B Line 11; OR, For | e: Copy your total current monthly rm 122C-1 Line 14. | income from Official | \$2,045.33 | | | | | |
| 9. | Copy the following spec | copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | |
| | From Part 4 on Schedul | e E/F, copy the following: | Total claim | | | | | | | |
| | 9a. Domestic support ob | igations (Copy line 6a.) | | \$0.00 | | | | | | |
| | 9b. Taxes and certain oth | er debts you owe the governn | nent. (Copy line 6b.) | \$0.00 | | | | | | |
| | 9c. Claims for death or pe | ersonal injury while you were ir | ntoxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| | 9d. Student loans. (Copy | line 6f.) | | \$0.00 | | | | | | |
| | 9e. Obligations arising ou priority claims. (Copy line | | r divorce that you did not report as | \$0.00 | | | | | | |
| | 9f. Debts to pension or p | rofit-sharing plans, and other s | similar debts. (Copy line 6h.) | \$0.00 | | | | | | |

\$0.00

9g. **Total.** Add lines 9a through 9f.

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| Fill in this | information to identify your ca | ase: | | | | |
|--|--|---|---|--|--|--|
| Debtor 1 | Trena | L | McGregory | | | |
| 20010. | First Name | Middle Nam | | | | |
| Debtor 2 | ina) = | | | | | |
| (Spouse, if fil | ^{ing)} First Name | Middle Nam | e Last Name | | | |
| United Sta | tes Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case num (If known) | ber | | | | | |
| Officia | I Form 106A/B | | | | | Check if this is an amended filing |
| Sched | dule A/B: Prope | rty | | | | 12/1 |
| category w responsibl write your | tegory, separately list and d where you think it fits best. B e for supplying correct inforr name and case number (if k Describe Each Residenc | e as complete and nation. If more spac nown). Answer ever | accurate as possible. If two ce is needed, attach a separ y question. | married people a rate sheet to this | re filing together, both a form. On the top of any a | are equally |
| 1. Do you | own or have any legal or eq | uitable interest in a | ny residence, building, land | l, or similar prope | rty? | |
| ✓ | No. Go to Part 2 | | | | | |
| | Yes. Where is the property? | | | | | |
| 1.1 | Street address, if available, or o | [| That is the property? Check a Single-family home | all that apply. | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: aims Secured by Property. |
| | offoot address, if available, of the | | Duplex or multi-unit building | _ | Current value of the | Current value of the |
| | | | Condominium or cooperativ | | entire property? | portion you own? |
| | | | Manufactured or mobile hor | me | | |
| | Number Street | | Land | | Describe the nature of | f vour ownership |
| | | Ļ | Investment property | | interest (such as fee s | simple, tenancy by |
| | City State | Zip Code | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | //no has an interest in the prone. | operty? Check | Check if this is co | ommunity property |
| | | , o | Debtor 1 only | | | |
| | | - | Debtor 2 only | | | |
| | | | Debtor 1 and Debtor 2 only | | | |
| | | <u> </u> | At least one of the debtors a | and another | | |
| | | L | _ | | rom ovek og legal | |
| | | | ther information you wish to roperty identification numbe | | tem, such as local | |
| If you | own or have more than one, lis | - | | | | |
| | | <u>w</u> | /hat is the property? Check a | all that apply. | | claims or exemptions. Put |
| 1.2 | Street address, if available, or o | ther description | Single-family home | | | red claims on Schedule D: aims Secured by Property. |
| | Street address, if available, of t | other description | Duplex or multi-unit building | g | | , , |
| | | Ī | Condominium or cooperativ | /e | Current value of the entire property? | Current value of the portion you own? |
| | | Ī | Manufactured or mobile hor | me | | |
| | Number Ctreet | | Land | | | |
| | Number Street | Ī | Investment property | | Describe the nature of interest (such as fee s | |
| | Oit. Otata | - Zin Codo | Timeshare Other | | the entireties, or a life | . , |
| | City State | Zip Code | Other | | | |
| | | | /ho has an interest in the prone. | operty? Check | Check if this is co (see instructions) | ommunity property |
| | | Ĺ | Debtor 1 only | | | |
| | | F | Debtor 2 only | | | |
| | | F | Debtor 1 and Debtor 2 only | | | |
| | | F | At least one of the debtors a | | | |
| | | L | ther information you wish to | | tem such as local | |
| | | | ther information you wish to roperty identification numbe | | iem, such as local | |

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| Debtor 1 | Trena First Name | L Middle Name | McGregory Last Name | _ Case number | er (if known) | |
|------------|---|-------------------------|--|-----------------|---|---|
| | i ii st ivaine | | | | 5 | |
| 1.3 | et address, if available, or ot | | What is the property? Check all that ap Single-family home | oply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property. |
| | | [| Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | | Current value of the entire property? | Current value of the portion you own? |
| Nun | nber Street State | Zip Code | Land Investment property Timeshare | | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by |
| City | Gale | | Other Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anotoporty identification number: | her | (see instructions) | mmunity property |
| | the dollar value of the porve attached for Part 1. Wr | rtion you own for a | all of your entries from Part 1, includ | ling any entrie | s for pages | |
| | Describe Your Vehicle | | t in any vehicles, whether they are re | egistered or n | ot? Include any vehicles | |
| you own th | nat someone else drives. If y ns, trucks, tractors, sport ut | ou lease a vehicle, | also report it on Schedule G: Executory | - | - | |
| 3.1 | Make Model: Year: | Nissan Rogue 2012 | Who has an interest in the proper one. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2012 Nissan Rogue | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and | another | Current value of the entire property? \$5893.00 | Current value of the portion you own? \$5893.00 |
| | | | Check if this is community p instructions) | roperty (see | | |
| 3.2 | Make Model: Year: | | Who has an interest in the proper one. | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and | another | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is community p instructions) | | | |

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| Debtor 1 | Trena First Name | L Middle Name | McGregory Last Name | Case numbe | er (if known) | |
|----------|--|------------------|---|--|------------------------|---|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions) | nly rs and another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | | the amount of any secu | claims or exemptions. Put irred claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| Exar | nples: Boats, trailers, motors | • | At least one of the debtor Check if this is commu instructions) ecreational vehicles, other shing vessels, snowmobiles, | nity property (see r vehicles, and acce | | |
| 4.1 | Yes Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communinstructions) | nly rs and another | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 4.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) | nly rs and another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | - | • | f your entries from Part 2, i | | | 893.00 |

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| De | ebtor 1 | Trena First Name | L Middle Name | McGregory Last Name | Case number (if known) | _ |
|-------------------|-------------------------|----------------------------------|---|---------------------------------|---------------------------------|--|
| Pa | ırt 3: | Describe Y | our Personal and Household I | tems | | |
| D | o you | own or hav | e any legal or equitable intere | est in any of the following | items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | and furnishings liances, furniture, linens, china, kitche | enware | | |
| $ \boxed{2} $ | | Describe | bedroom set, dinette set | | | \$850.00 |
| | | ronics les: Televisions | s and radios; audio, video, stereo, an | d digital equipment; computer | s, printers, scanners; music | |
| ✓ | Yes. D | Describe | tv, computers, cell phone | | | \$600.00 |
| | Examp | | ue and figurines; paintings, prints, or oth in, or baseball card collections; other | | | |
| | No Yes. [| Describe | | | | |
| | | les: Sports, ph | rts and hobbies notographic, exercise, and other hobb s; carpentry tools; musical instrumen | | ables, golf clubs, skis; canoes | |
| ✓ | No Yes. D | Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and relate | ed equipment | | 1 |
| ✓ | No | | | | | |
| | Yes. D | Describe | | | | |
| | | | clothes, furs, leather coats, designer v | wear, shoes, accessories | | |
| Щ | No | | | | | 1 |
| ✓ | Yes. L | Describe | used clothing | | | \$700.00 |
| | 2. Jew Examp | | ewelry, costume jewelry, engagemen er | t rings, wedding rings, heirloo | m jewelry, watches, gems, | |
| <u>✓</u> | | Describe | costume jewelry | | | \$50.00 |
| | | -farm animals les: Dogs, cats | s s, birds, horses | | | 1 |
| | | Describe | | | | |
| 1 | 4. Any | other person | al and household items you did no | ot already list, including any | health aids you did not list | |
| ✓ | No | | | | | |
| | Yes. D | Describe | | | | |
| | | | llue of all of your entries from Part | | pages you have attached | \$2200.00 |

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| Debt | | Trena | L | McGregory | Case number (if known) | |
|--------------|----------|---|---|------------------------------|---------------------------------------|--|
| | _ | First Name | Middle Name | Last Name | | |
| Part 4 | 4: | Describe Your F | inancial Assets | | | |
| Do | you | own or have any | r legal or equitable interest | in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. (| | | | | | |
| E | | ples: Money you hav No | e in your wallet, in your home, in | a safe deposit box, and on h | and when you file your petition | |
| | | Yes | | | Cash: | |
| 17. | | | vings, or other financial accounts; stitutions. If you have multiple acc | | s in credit unions, brokerage houses, | |
| | ✓ | No Yes | | Institution name: | | |
| | | | 17.1. Checking account: | Walmart | | \$40.00 |
| | | | 17.2. Checking account: | | | |
| | | | 17.3. Savings account: | | | |
| | | | 17.4. Savings account: | | | |
| | | | 17.5. Certificates of deposit: | | | |
| | | | 17.6. Other financial account: | | | |
| | | | 17.7. Other financial account: | | | |
| | | | 17.8. Other financial account: | | | |
| | | | 17.9. Other financial account: | | | |
| 18. | | mples: Bond funds, | or publicly traded stocks investment accounts with brokers | age firms, money market acco | ounts | |
| | | No Yes | Institution or issuer name: | | | |
| | | | | | | |
| | | | | | | |
| 19. | | n-publicly traded st LLC, partnership, a | | ed and unincorporated bus | sinesses, including an interest in | |
| | ~ | No | | | | |
| | | Yes. Give specific information about | Name of entity | | % of ownership: | |
| | | them | | | | |
| | | | | | | |

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| Deb | tor 1 | | L | McGregory | Case number (if known) | |
|-----|---------------------|---|---|--------------------------------------|---------------------------------|--|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg | otiable instruments i | orate bonds and other negotiab nclude personal checks, cashiers' ents are those you cannot transfer | checks, promissory notes, and n | noney orders. | |
| | | No Yes. Give specific information about them | Issuer name: | | | |
| | | | | | | |
| | | | | | | |
| 21. | | irement or pension mples: Interests in IR | accounts RA, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts, or other | pension or profit-sharing plans | |
| | ✓ | No | | | | |
| | | Yes. List each | Type of account: | Institution name: | | |
| | | account separately. | 401(k) or similar plan: | | | |
| | | | Pension plan: | - | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | |
| | | | Additional account: | | | |
| | | | Additional account: | | | |
| 22. | Your Exar com | | prepayments deposits you have made so that vith landlords, prepaid rent, public | | | |
| | | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Ann | uities (A contract fo | r a periodic payment of money to | you, either for life or for a number | er of years) | |
| | ✓ | No Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Debte | or 1 Trena | L Maratana N | McGregory | Case number (if known) | |
|-------|--|---|--|--|--|
| 0.4 | First Name | Middle N | | | |
| 24. | | 30(b)(1), 529A(b), and 529(l | | inder a qualified state tuition program. | |
| | Ves | Institution name and descrip | tion. Separately file the records of any inte | erests.11 U.S.C. § 521(c): | |
| | | | | | |
| 25. | Trusts, equita | ble or future interests in p | roperty (other than anything listed in | line 1), and rights or powers | |
| | exercisable fo | r your benefit | | | |
| | Yes. Descr | be | | | |
| 26. | | | secrets, and other intellectual properts, proceeds from royalties and licensing a | | |
| | ✓ No Yes. Descr | ibe | | | |
| | | | | | |
| 27. | | chises, and other general ding permits, exclusive licens | intangibles ses, cooperative association holdings, liqu | or licenses, professional licenses | |
| | ✓ No | | | | |
| | Yes. Descr | be | | | |
| | | | | | |
| | | | | | |
| Mon | ey or proper | y owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or propert | | | | portion you own? Do not deduct secured |
| | | | | | portion you own? Do not deduct secured |
| | Tax refunds ow ✓ No ☐ Yes. Give s | red to you Decific information | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds ow ✓ No — Yes. Give s about you al | pecific information them, including whether ready filed the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ow No Yes. Give so about you al and th | pecific information them, including whether ready filed the returns te tax years | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ow No Yes. Give s about you al and th | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give si about you al and the Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give si about you al and the Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: Local: ace, divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give si about you al and the Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: Local: ace, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t |
| 28. | Tax refunds ow No Yes. Give si about you al and the Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: Local: nce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds ow No Yes. Give si about you al and the Family support Examples: Past | pecific information them, including whether ready filed the returns te tax years | pousal support, child support, maintenar | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds ow No Yes. Give synthem about you all and the samples: Past No Yes. Give synthem about you all and the samples: Past Other amounts Examples: Unpage | pecific information them, including whether ready filed the returns the tax years | pousal support, child support, maintenar e payments, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give sy about you al and the second of the secon | pecific information them, including whether ready filed the returns the tax years | e payments, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |
| 29. | Tax refunds ow No Yes. Give synthem about you all and the samples: Past No Yes. Give synthem about you all and the samples: Past Other amounts Examples: Unpage | pecific information them, including whether ready filed the returns to tax years | e payments, disability benefits, sick pay, | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb ¹ | tor 1 Trena | L | McGregory | Case number (if known) | |
|------------------|--|--|---|---|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance paramples: Health, disabil | | avings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and list | ance company | mpany name: | Beneficiary: | Surrender or refund value: |
| 32. | | | | y, or are currently entitled to receive | |
| 33. | | rties, whether or not you l ployment disputes, insuranc | have filed a lawsuit or made be claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and uto set off claims No Yes. Describe | ınliquidated claims of ever | ry nature, including counterd | claims of the debtor and rights | |
| 35. | Any financial assets yo No Yes. Describe | u did not already list | | | |
| 36. | | - | rt 4, including any entries fo | | \$40.00 |
| Part | 5: Describe Any Bu | siness-Related Proper | ty You Own or Have an Ir | nterest In. List any real estate in Pa | rt 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | / legal or equitable interes | st in any business-related pro | operty? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or No Yes. Describe | commissions you already | earned | | or oxemptions |
| 39. | Office equipment, furni Examples: Business-relat No Yes. Describe | | dems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, ele | ctronic devices |
| | | | | | |

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| Deb | tor 1 Trena I | L McGregory | Case number (if known) | |
|----------|---|---|--------------------------------|--|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equipment, su | pplies you use in business, and tools of your | trade | |
| | ₩ No | | | |
| | | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| 41. | Inventory | | | |
| | No No | | | |
| | | | | |
| | Yes. Describe | | | |
| | | | | |
| 40 | | | | |
| 42. | Interests in partnerships or joint ve | intures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | - |
| | | | | |
| | | | | |
| | | | <u></u> | _ |
| 43. (| Customer lists, mailing lists, or othe | r compilations | | |
| | I ✓ No | | | |
| | | | 20. 6 101/414/20 | |
| | Yes. Do your lists include persona | ally identifiable information (as defined in 11 U.S | S.C. § 101(41A))? | |
| | □ No | | | |
| | <u> </u> | | | |
| | Yes. Describe | | | |
| | | | | |
| 44. | Any business-related property you | did not already list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| 45. A | dd the dollar value of all of your ent | ries from Part 5, including any entries for pa | iges you have attached | |
| for Pa | art 5. Write that number here | | | |
| <u> </u> | <u> </u> | | | |
| Part | | ommercial Fishing-Related Property Y | ou Own or Have an Interest In. | |
| | If you own or have an interest in farm | ıland, list it in Part 1. | | |
| 46. | Do you own or have any legal or ed | quitable interest in any farm- or commercial | fishing-related property? | |
| | | , | | Current value of the |
| | | | | |
| | No. Go to Part 7. | | | |
| | No. Co to Port 7 | | | portion you own? Do not deduct secured claims |
| | No. Go to Part 7. | | | portion you own? |
| 47. | No. Go to Part 7. | | | portion you own? Do not deduct secured claims |
| 47. | No. Go to Part 7. Yes. Go to line 47. | sed fish | | portion you own? Do not deduct secured claims |
| 47. | No. Go to Part 7. Yes. Go to line 47. Farm animals Examples: Livestock, poultry, farm-rai | sed fish | | portion you own? Do not deduct secured claims |
| 47. | No. Go to Part 7. Yes. Go to line 47. Farm animals Examples: Livestock, poultry, farm-rai | sed fish | | portion you own? Do not deduct secured claims |
| 47. | No. Go to Part 7. Yes. Go to line 47. Farm animals Examples: Livestock, poultry, farm-rai | sed fish | | portion you own? Do not deduct secured claims |
| 47. | No. Go to Part 7. Yes. Go to line 47. Farm animals Examples: Livestock, poultry, farm-rai | sed fish | | portion you own? Do not deduct secured claims |

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| Debt | or 1 Trena First Name | | IcGregory Ca | se number (if known) | |
|--------------|----------------------------|---|---------------------------|------------------------------|-------------|
| 48. | Crops-either growing | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 49. | Farm and fishing equip | pment, implements, machinery, fixture | s, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing sunn | lies, chemicals, and feed | | | |
| 00. | No No | mos, snomouls, and lood | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | Any farm- and comme | rcial fishing-related property you did n | ot already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | II of your entries from Part 6, including | | | |
| ► TOI Pa | irt o. Write that numbe | r nere | | | |
| | | | | | |
| Part 7 | Describe All Pro | perty You Own or Have an Intere | st in That You Did Not Li | st Above | |
| | Do you have other pro | perty of any kind you did not already li | | | |
| | | s, country club membership | | | |
| | ✓ No Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54 A | dd the dollar value of a | II of your entries from Part 7. Write tha | it number here | 1 | • |
| J4. A | du the donar value of a | ii oi your entires iioiii i art i. write tiia | it number here | | |
| | | | | | |
| | | | | | |
| | | real Baradilla e | | | |
| Part 8 | B: List the Totals of | f Each Part of this Form | | | |
| 55. F | Part 1: Total real estate | e, line 2 | | > | |
| 56. p | oart 2 total vehicles, lin | ne 5 | ¢5902 00 | | |
| 57. P | art 3: Total personal ar | nd household items, line 15 | \$5893.00 \$2200.00 | | |
| 58. P | art 4: Total financial as | ssets, line 36 | \$40.00 | | |
| 59. F | Part 5: Total business-r | elated property, line 45 | Ψ+0.00 | | |
| 60. F | Part 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62. T | otal personal property | . Add lines 56 through 61 | \$8133.00 | | + \$8133.00 |
| | | | ψ5100.00 | Copy personal property total | + ψ0100.00 |
| | | | | | \$8133.00 |
| 63. T | otal of all property on S | Schedule A/B. Add line 55 + line 62 | | | |

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|--|--|---|--|---|---|---|
| Filli | in this inforn | nation to identify your case: | | | | |
| Deb | otor 1 | Trena First Name | L Middle Name | McGregory Last Name | | |
| | otor 2 ouse, if filing) | First Name | Middle Name | Last Name | | |
| Unit | ted States Ba | ankruptcy Court for the: No | rthern E | District of Illinois (State) | | |
| | se number own) | | | (State) | | |
| Of | ficial I | Form 106C | | | | Check if this is an amended filing |
| Sc | hedule | C: The Propert | ty You Claim a | s Exemp | | 04/16 |
| addi For stat the tax- und you | each item e a specif amount of exempt re er a law the r exemption t 1: Ident | es, write your name and on of property you claim a ic dollar amount as exert any applicable statutoretirement funds—may be nat limits the exemption would be limited to the tify the Property You Claim | case number (if known as exempt, you must s mpt. Alternatively, you ry limit. Some exempt be unlimited in dollar a to a particular dollar me applicable statutor aim as Exempt | specify the am u may claim th tions—such as amount. Howe amount and th y amount. | ount of the exemption you clai e full fair market value of the p those for health aids, rights to ver, if you claim an exemption ne value of the property is dete | property being exempted up to receive certain benefits, and |
| 1. | | of exemptions are you clair re claiming state and federa | • | , | , | |
| | | re claiming state and redera | | | 3 022(0)(0) | |
| 2. | | operty you list on Schedule | | | information below. | |
| | | ription of the property and hedule A/B that lists this | Current value of the portion you own | | exemption you claim Sp | pecific laws that allow exemption |

Copy the value from Schedule A/B

\$5,893.00

\$50.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

✓

V

\$0

\$50.00

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

No Yes

Brief

description:

Line from Schedule A/B:

description:

Line from

✓ No

Schedule A/B:

Nissan Rogue, 2012,

2012 Nissan Rogue

costume jewelry

12

3. Are you claiming a homestead exemption of more than \$160,375?

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

735 ILCS 5/12-1001(b)

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McGregory Debtor 1 Trena Case number (if known) First Name Middle Name Last Name **Additional Page** Part 2: Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$700.00 description: **✓** \$700.00 used clothing 100% of fair market value, up to any I ine from applicable statutory limit Schedule A/B: 11 Brief 735 ILCS 5/12-1001(b) \$600.00 description: **✓** \$600.00 tv, computers, cell 100% of fair market value, up to any phone applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$850.00 description: $\overline{}$ \$850.00 bedroom set, dinette set 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief description: \$40.00 \checkmark \$40.00 Checking account, 100% of fair market value, up to any

applicable statutory limit

Walmart

17

I ine from Schedule A/B: Case 18-16248 Doc 1 Filed 06/06/18 Entered 06/06/18 16:01:09 Desc Main Document Page 23 of 79

| | | | _, | 7 ago 20 01 | . • | | |
|----------------------|-----------------------|--|----------------------------|---|---|---|------------------------------------|
| Fill in th | nis infor | mation to identify your ca | se: | | | | |
| Debtor | 1 | Trena | L | McGregory | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debtor (Spouse, | | First Name | Middle Name | Last Name | | | |
| United | States B | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Officed | Otates L | diritation of the | Northern | (State) | | | |
| Case n (If known) | | | | | | | |
| Offic | cial | Form 106D | | | J | | heck if this is a mended filing |
| Sch | edu | le D: Credito | ors Who Ha | ve Claims Secur | ed by Prop | ertv | 12/1 |
| more sp name a | nd case | needed, copy the Addition number (if known). | nal Page, fill it out, nu | le are filing together, both are equinber the entries, and attach it to | • | | |
| 1. D | • | reditors have claims se | ,, | • | | | |
| L | _ | | | with your other schedules. You have | e nothing else to repo | ort on this form. | |
| | Yes. | Fill in all of the information | n below. | | | | |
| Part 1: | List A | All Secured Claims | | | | | |
| i | separate | ly for each claim. If more th | an one creditor has a pa | cured claim, list the creditor rticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | Carmax . | Auto Finance | Describe the property | y that secures the claim: | \$14,409.73 | \$5,893.00 | \$8,516.73 |
| | 12800 | TUCKAHOE CREEK PKW | Nissan Rogue Value: | | | | |
| - | Numb | er Street | Contingent | e, the claim is: Check all that apply. | | | |
| - | | | Unliquidated | | | | |
| - | RICHMO | ND VA 23238 State ZIP Code | Disputed | | | | |
| | City Who ow | es the debt? Check one. | Nature of lien. Check | all that apply. | | | |
| | | tor 1 only tor 2 only | An agreement you car loan) | made (such as mortgage or secured | | | |
| İ | Deb | tor 1 and Debtor 2 only | Statutory lien (such | n as tax lien, mechanic's lien) | | | |
| i | | east one of the debtors | Judgment lien from | n a lawsuit | | | |
| ı | | another | Other (including a | right to offset) | | | |
| | | community debt bt was | Last 4 digits of accou | unt number | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$14,409.73

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| Fill i | n this inforr | nation to identify your ca | ase: | | | | | |
|---|---|---|--|--|--|--|--|--|
| Deb | tor 1 | Trena | L | McGregory | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Deb | | | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ed States B | ankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case (If knd | e number own) | | | . , | | | | |
| Off | icial Fo | orm 106E/F | | | | Che | ck if this is an | amended filing |
| Sc | hedu | le E/F: Cre | ditors Who | Have Uns | ecured Claims | | | 12/15 |
| other Form clain the e know | r party to a 106A/B) a ns that are ntries in th n). | ny executory contracts nd on Schedule G: Exe listed in Schedule D: C ne boxes on the left. Att | s or unexpired leases that cutory Contracts and Und reditors Who Hold Claims | t could result in a clai expired Leases (Offici s Secured by Property | nims and Part 2 for creditors wit m. Also list executory contracts al Form 106G). Do not include a . If more space is needed, copy ne top of any additional pages, v | on <i>Schedu</i> ny creditor the Part yo | <i>ile A/B: Prop</i> s with partia ou need, fill i | perty (Official ally secured t out, number |
| 1. | - | editors have priority un ão to Part 2. | secured claims against y | /ou? | | | | |
| 2. | listed, iden As much a Continuati | tify what type of claim it i s possible, list the claims on Page of Part 1. If more | is. If a claim has both priori | ty and nonpriority amou ding to the creditor's na particular claim, list the | | both priority | and nonprior | rity amounts. |
| | | | | | | Total claim | Priority amount | Nonpriority amount |

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Debtor 1 Trena McGregory Case number (if known) First Name Last Name List All of Your NONPRIORITY Unsecured Claims Part 2: Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **V** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. 4.1 Arnold Scott Harris P.C \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 111 W Jackson Blvd Ste 600 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. c/o Frank Suda Contingent Unliquidated 60604 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify unsecured Is the claim subject to offset? No Yes **BRCLYSBANKDE** \$0.00 Last 4 digits of account number 0098 Nonpriority Creditor's Name When was the debt incurred? 4/2015 PO BOX 26182 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19899 Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **V** No Yes Capital One Bank 4.3 \$341.08 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 3001 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Pennsylvania 19355 Malvern Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify unsecured Is the claim subject to offset? **✓** No

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McGregory Debtor 1 Trena Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CB/MARATHON \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5/2015 PO BOX 182789 Number Street As of the date you file, the claim is: Check all that apply. Contingent COLUMBUS 43218 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt CreditCard Other. Specify _ Is the claim subject to offset? V No Yes City of Chicago - Dept. of Finance \$2,267.80 Last 4 digits of account number Nonpriority Creditor's Name PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: $\overline{}$ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ unsecured Is the claim subject to offset? **✓** No Yes City of Rolling Meadows \$290.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3600 Kirchoff Road Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Rolling Meadows 60008 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify _

unsecured

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Debtor 1 Trena McGregory Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 ComEd \$476.58 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3 Lincoln Center Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ unsecured V Is the claim subject to offset? No Yes 4.8 Illinois Tollway \$4,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 2700 Ogden Ave Street As of the date you file, the claim is: Check all that apply. Legal Dept Contingent Unliquidated Downers Grove Illinois 60515 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify V Is the claim subject to offset? **✓** No Yes KOHLS/CAPONE 4.9 \$0.00 Last 4 digits of account number 7482 Nonpriority Creditor's Name When was the debt incurred? 12/2014 PO BOX 3115 Number As of the date you file, the claim is: Check all that apply. Contingent MILWAUKEE 53201 Wisconsin Unliquidated Zip Code City State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify CreditCard Is the claim subject to offset? ✓

✓ No Yes

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McGregory Debtor 1 Trena Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Midland Funding 4.10 \$1,323.06 - Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 8875 Aero Dr., Ste. 200 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 92123 San Diego California Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify _ unsecured Is the claim subject to offset? No ◪ ☐ Yes 4.11 Nicor Gas \$1,037.79 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 0632 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Aurora Illinois 60507 Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify unsecured Is the claim subject to offset? **✓** No Yes NORDSTM/TD \$822.00 4.12 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 4/2015 PO Box 6565 Number As of the date you file, the claim is: Check all that apply. Contingent Colorado 80155 Englewood Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? **√** No

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McGregory Debtor 1 Trena Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim NW COLLECTOR** 4.13 \$103.00 Last 4 digits of account number Nonpriority Creditor's Name 3601 ALGONQUIN RD SUITE 232 When was the debt incurred? 1/2018 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ROLLING** 60008 Illinois Unliquidated **MEADOW** State Zip Code Citv Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Other. Specify ORIGINAL CREDITOR: MEDICAL Is the claim subject to offset? **✓** No Yes 4.14 ONEMAIN \$0.00 Last 4 digits of account number 1005 Nonpriority Creditor's Name When was the debt incurred? 4/2015 P.O. Box 742536 Number Street As of the date you file, the claim is: Check all that apply. Contingent Cincinnati 45274 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ InstallmentLoan Is the claim subject to offset? **✓** No Yes PORTFOLIO RECOVERY ASS 4.15 \$1,153.74 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 120 CORPORATE BLVD STE Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 23502 NORFOLK Virginia State Disputed City 7ip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify unsecured Is the claim subject to offset? ◪ No

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| Debtor | 1 Trena L First Name Middle Name | McGregory Case number (if known) | |
|---------|---|---|-------------|
| Part 2: | | | |
| | After listing any entries on this page, number them b | • | Total claim |
| 4.16 | Quantum 3 Group LLC as agent for MOMA Funding LLC | Last 4 digits of account number | \$175.82 |
| | Nonpriority Creditor's Name PO Box 788 | When was the debt incurred? n/a | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | c/o Dharmind S. Sandhu | Contingent | |
| | Kirkland Washington 98083 | Unliquidated | |
| | City State Zip Code | e Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim relates to a community debt | ✓ Other. Specify unsecured | |
| | Is the claim subject to offset? | _ | |
| | ✓ No | | |
| | Yes | | |
| 4.17 | SYNCB/AMAZON Nonpriority Creditor's Name | Last 4 digits of account number 7025 | \$0.00 |
| | PO BOX 965015 | When was the debt incurred? 5/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | ORLANDO Florida 32896 City State Zip Code | e Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | Other. Specify CreditCard | |
| | ✓ No | | |
| | Yes | | |
| 4.18 | SYNCB/WALMAR Nonpriority Creditor's Name | Last 4 digits of account number 0335 | \$0.00 |
| | PO BOX 965024 | When was the debt incurred? 3/2015 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | FI PAGG | Contingent | |
| | EL PASO Texas 79998 City State Zip Code | e Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? No | Other. Specify CreditCard | |

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McGregory Debtor 1 Trena Case number (if known) Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 \$472.00 - Last 4 digits of account number Nonpriority Creditor's Name PO BOX 673 When was the debt incurred? 1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent MINNEAPOLIS 55440 Minnesota Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify CreditCard Is the claim subject to offset? Yes 4.20 TCF Bank \$235.00 Last 4 digits of account number Nonpriority Creditor's Name 1405 Xenium Ln N Ste 180 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55441 Minneapolis Minnesota Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ unsecured Is the claim subject to offset? **✓** No Yes The City of Berwyn \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 6700 26th St When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Berwyn Illinois 60402 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ unsecured Is the claim subject to offset? No

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| Debtor | Trena First Name | L Middle Name | McGregory Last Name | Case number (if known) | |
|---------|---|-----------------------|------------------------|--|-------------|
| Part 2: | Your NONPRIORITY Unse | cured Claims - Cont | inuation Page | | |
| | After listing any entries on this | page, number them beg | ginning with 4.5, fo | llowed by 4.6, and so forth. | Total claim |
| | Village of Melrose Park Nonpriority Creditor's Name 1 N. Broadway Number Street | | When v | digits of account number | \$300.00 |
| | Melrose Park Illinois 60160 City State Zip Code | | Uni | ntingent liquidated puted | |
| | Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | | | f NONPRIORITY unsecured claim: Ident loans Iligations arising out of a separation agreement or orce that you did not report as priority claims ots to pension or profit-sharing plans, and other sim ots ots unsecured | ilar |
| | Is the claim subject to offset? No Yes | | | | |

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McGregory Case number (if known)
Last Name Debtor 1 Trena First Name Middle Name

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
|-----------------------------|--|-------|--|
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | r statistical reporting purposes only. 28 U.S.C. §159. |
| | | | Total claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | a. \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | 6b. | b. \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | c. \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 e. |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | g. \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | h\$0.00 |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | i. \$13,397.87 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | j. \$13,397.87 |

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| Fill in this infor | mation to identify your c | ase: | | |
|---------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | Trena | L | McGregory | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | Do | cument rag | .gc 33 01 7 3 |
|-------------|---------------------|-----------------------------|--|----------------------------|--|
| Fill in t | this infor | mation to identify your | case: | | |
| Debto | r 1 | Trena | L | McGregory | |
| Debto | . 0 | First Name | Middle Name | Last Name | |
| | r∠ e, if filing) | First Name | Middle Name | Last Name | |
| United | States E | Sankruptcy Court for the | : Northern | District of Illinois | |
| Case r | number | | | (State) | |
| (| - 7 | | | | Check if this is ar |
| ر ر. | | T 400LI | | | amended filing |
| Offi | cıaı | Form 106H | | | |
| Sch | edul | e H: Your Co | debtors | | 12/15 |
| 1. D | o you ha No Yes | · | you are filing a joint case, do | · | |
| | | | u lived in a community pro exico, Puerto Rico, Texas, W | | rry? (Community property states and territories include Arizona, California, nsin.) |
| <u> </u> | _ | Go to line 3. | | | |
| L | | Did your spouse, forr No | ner spouse, or legal equiva | lient live with you at the | ne time? |
| | L¥ | | nity state or territory did you | ı live? | Fill in the name and current address of that person. |
| | | Name of your spouse | , former spouse, or legal equ | ivalent | |
| | | Number Street | | | |
| | | City | State | Zip Co | Code |
| | | • | _ | - | or if your spouse is filing with you. List the person shown in line 2 |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 200 | Juillelle | i age so | 0173 | | |
|--|--|---|--|-------------------|---------------------|--|---------------|
| Fill in this inforn | nation to identify | your case: | | | | | |
| Debtor 1 Tr | ena | L | McGre | egory | | | |
| | rst Name | Middle Name | Last N | <u> </u> | — Che | eck if this is: | |
| Debtor 2 (Spouse, if filing) Fire | ant Ninana | Mistalla Nassa | 1+ N1 | | | An amended filing | |
| | | Middle Name | Last N | | | A supplement showing post-pet | ition chanter |
| United States Bar the: Case number | nkruptcy Court for | Northern | District of Illii | nois tate) | | expenses as of the following dat | |
| (If known) | | | | | _ | MM / DD / YYYY | |
| Official Fo | orm 106l | | | | | | |
| Schedule | I: Your In | come | | | | | 12/ |
| spouse. If more number (if know | | , attach a separate she y question. | | | | not include information abo ional pages, write your nam | |
| 1. Fill in your en | nployment | | Debtor 1 | | | Debtor 2 | |
| information. | | Employment status | ✓ Employed | | | - Employed | |
| If you have mo attach a separa | ore than one job, | | ٠ ك | yeu nployed | | Employed Not Employed | |
| information ab employers. | . • | Occupation | cashier | | | - Inter Employee | |
| Include part tir self-employed | ne, seasonal, or | Employer's name | Portillo's Hot Dogs LLC 2001 Spring Road Number Street | | | | |
| | ay include student | Employer's address | | | | Number Street | |
| 0.1101110111011 | , i. i. applico. | | | | | | |
| | | | Oak Brook City | Illinois State | 60523 Zip Code | City State | Zip Code |
| | | How long employed there? | 5 years 5 r | nonths | | | |
| Part 2: Give I | Details About N | Ionthly Income | | | | | |
| | | | n. If you have | nothing to repo | ort for any line, v | write \$0 in the space. Include yo | ur non-filing |
| spouse unless yo | ou are separated. | | | | | | |
| | n-filing spouse have ach a separate she | | combine the | | | or that person on the lines below | . If you need |
| | | | | For | Debtor 1 | non-filing spouse | |
| | | ary, and commissions (before calculate what the monthly | | 2. | \$2,080.00 | | |
| 3. Estimate ar | nd list monthly over | time pay. | | 3. | + \$0.00 | | |
| | | | | | | | |

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| Deb | tor 1 rena First Name | | McGregory Last Name | Case numbe | r <i>(if</i> | |
|----------------------|--|---|------------------------|------------------------|-----------------------------------|-------------------------|
| | I list Name | MIGGIE NATITE | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Co | opy line 4 here | | → 4. | \$2,080.00 | | |
| 5. Li : | st all payroll dedu | | | | | |
| 5 | a. Tax, Medicare, | and Social Security deductions | 5a. | \$484.34 | | |
| 5 | b. Mandatory con | tributions for retirement plans | 5b. | \$0.00 | | |
| 5 | c. Voluntary conti | ributions for retirement plans | 5c. | \$0.00 | | |
| 5 | d. Required repay | ments of retirement fund loans | 5d. | \$0.00 | | |
| 5 | e. Insurance | | 5e. | \$0.00 | | |
| 51 | f. Domestic suppo | ort obligations | 5f. | \$0.00 | | |
| 5 | g. Union dues | | 5g. | \$0.00 | | |
| 5 | h. Other deduction | ons. Specify: | _ 5h. + | \$0.00 + | | |
| 6. Ac +5h. | | ductions. Add lines 5a + 5b + 5c + 5d + 5e +5 | f + 5g 6. | \$484.34 | | |
| 7. C a | alculate total moi | nthly take-home pay. Subtract line 6 from line | e 4. 7. | \$1,595.66 | - | |
| 8. Li : | st all other incom | ne regularly received: | | | | |
| 8 | business, profe | • | | | | |
| | | ent for each property and business showing ordinary and necessary business expenses, and | I | | | |
| | the total monthly | y net income. | 8a. | \$0.00 | | |
| 81 | b. Interest and di | vidends | 8b. | \$0.00 | | |
| 8 | dependent regi | - | | | | |
| | | . spousal support, child support, maintenance, nt, and property settlement. | 8c. | \$0.00 | | |
| 8 | d. Unemployment | compensation | 8d. | \$0.00 | | |
| 8 | e. Social Security | , | 8e. | \$0.00 | | |
| 8: | Include cash ass cash assistance t | ent assistance that you regularly receive istance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es | s 8f. | \$0.00 | | |
| 8 | g. Pension or reti | rement income | 8g. | \$0.00 | | |
| 8 | h. Other monthly | income. Specify: tax refund | 8h. + | \$541.67 + | | |
| 9. A c | dd all other incom | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9. | \$541.67 | | |
| | | income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp | 10. pouse | \$2,137.33 | | \$2,137.33 |
| In fri | clude contribution iends or relatives. | gular contributions to the expenses that you s from an unmarried partner, members of your amounts already included in lines 2-10 or amo | household, your | dependents, your roomr | • | |
| S | pecify: | | | | 1 | 1. + \$0.00 |
| | | n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su | | | • | \$2,137.33 |
| • | aracamount of | cammay or corroduce and oldubular ou | ay or corain | | , applico | Combined monthly income |
| 13. | No. | increase or decrease within the year after | you file this form | 1? | | · . |
| L | Yes. Explain: | | | | | |

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| | | Doci | ument Page 38 of 79 | 9 | |
|----------------------------|--|---|--|-------------------------------------|--|
| Fill in this infor | mation to identify yo | our case: | | | |
| Debtor 1 | Trena First Name | L Middle Name | McGregory Last Name | | |
| Debtor 2 | i not ramo | Middle Hairie | Zast Namo | Check if this is: | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | |
| United States B | sankruptcy Court for | the: Northern | District of Illinois (State) | A supplement sho expenses as of the | owing post-petition chapter 13 e following date: |
| Case number (If known) | | | | MM / DD / YYYY | |
| | Form 106 e J: Your E | _ | | | 12/15 |
| information. If i | • | ed, attach another sheet to this | re filing together, both are equal s form. On the top of any addition | | |
| 1. Is this a join | | | | | |
| | | | | | |
| | o to line 2 Des Debtor 2 live in | a separate household? | | | |
| | No | | | | |
| L | Yes. Debtor 2 mu | st file Official Forms 106J-2, <i>Expe</i> | nses for Separate Household of Deb | tor 2. | |
| 2. Do you have | e dependents? | No | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | enses include f people other | No | | | |
| yourself and dependents | - | Yes | | | |
| Part 2: Estir | nate Your Ongoi | ng Monthly Expenses | | | |
| | of a date after the b | | you are using this form as a supploplemental Schedule J, check the | | |
| | • | on-cash government assistance ed it on <i>Schedule I: Your Incom</i> e | • | | Your expenses |
| | or home ownership or the ground or lot. 4 | | nclude first mortgage payments and | | 5500.00 |
| If not incl | uded in line 4: | | | | |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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| 5. Additional mortgage payments for your residence, such as home equity loans 5. \$0.00 6. Utilities: 6 \$0.00 6. Utilities: 6 \$6.50.00 6. Water, sever, garbage collection 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 6. Chelephone, coll phone, Internet, satellite, and cable services 6 \$0.00 7. Colding, Burdry, and dry cleaning 6 \$0.00 10. Personal care products and services 11 \$10.00 11. Medical and dental services 11 \$10.00 12. Transportation, Include services 12 \$0.00 13. Entertainment, clubs, recreation, newspap | First Name | Middle Name Last Name | | |
|---|----------------------------------|---|-----|---------------|
| 6. Ullities 6a. Sets.00 6b. Electricity, heat, natural gas 6a. Sets.00 6b. Water, sewer, garbage collection 6b. So.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S115.00 6d. Other, Specify; 6d. S0.00 7. Food and housekeeping supplies 8. S0.00 8. Childcare and children's education costs 8. S0.00 9. Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 10. \$100.00 11. Medical and cental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$137.00 Do not include car payments 12. \$137.00 14. Charitable contributions and religious donations 13. \$0.00 15. Instrationment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 15. Insurance. 15. \$130.00 15. Insurance. 15. \$0.00 15. Insurance. 15. \$0.00 15. Insurance. 15. \$0.00 15. Insurance. 15. \$0.00 15. Cythicle insurance. 15. \$0.00 15. Taxes. Do not include laxes deducted from your pay or included in l | | | | Your expenses |
| 6a. Electricity, heat, natural gas | 5. Additional mortgage payme | ents for your residence, such as home equity loans | 5. | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$115.00 6d. Other, Specify: 6c. \$115.00 7. Food and housekceping supplies 7. \$300.00 8. Childcare and children's education costs 8. \$0.00 9. Citothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 11. \$100.00 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$137.00 10. not include care payements 13. \$0.00 14. Charitable contributions and religious donations 13. \$0.00 15. Insurance 15 \$0.00 15a. Life insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 \$psecify: <td>6. Utilities:</td> <td></td> <td></td> <td></td> | 6. Utilities: | | | |
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| 6d. Other. Specify 6d \$0.00 7. Food and housekeeping supplies 7. \$300.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 10. \$200.00 10. Personal care products and services 11. \$100.00 11. Medical and dental expenses 11. \$100.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$137.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance. 15 \$0.00 15. List insurance deducted from your pay or included in lines 4 or 20. 15 \$0.00 15. Lealth insurance 15 \$0.00 15. Health insurance 15 \$0.00 15. Lealth insurance. 15 \$0.00 15. Late, be chickle insurance. \$0.00 \$0.00 15. Late, be chickle insurance. \$0.00 \$0.00 16. Taxes, Do not | 6b. Water, sewer, garbage co | ollection | 6b. | \$0.00 |
| 7. Food and housekeeping supplies 7. \$300.00 8. Childcare and childcare's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$200.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$100.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$137.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15s \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15s \$0.00 15c. Vehicle insurance. Specify: 15c \$10.00 15c. Vehicle insurance. Specify: 15c \$0.00 15c. Vehicle insurance. Specify: 17c < | 6c. Telephone, cell phone, Ir | nternet, satellite, and cable services | 6c. | \$115.00 |
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| 11. Medical and dental expenses 11. \$100.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$137.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b. Health insurance 15c. Vehicle insurance | 9. Clothing, laundry, and dry | cleaning | 9. | \$200.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$137.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. | 10. Personal care products a | nd services | 10. | \$100.00 |
| Do not included car payments 13. 20.00 14. Charitable contributions and religious donations 14. 20.00 15. Insurance. | 11. Medical and dental expen | nses | 11. | \$100.00 |
| 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$130.00 15c. Vehicle insurance. Specify: 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments: 16 \$0.00 17. Installment or lease payments: 17a \$0.00 17b. Car payments for Vehicle 1 17a \$0.00 17c. Other. Specify: 17c \$0.00 17c. Other. Specify: 17c \$0.00 17c. Other. Specify: 17c \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 20a. Mortgages on other property 20a \$0.00 20b. Real | - | | 12. | \$137.00 |
| 15. Insurance. | 13. Entertainment, clubs, rec | reation, newspapers, magazines, and books | 13. | \$0.00 |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$130.00 15c. Vehicle insurance. Specify: | 14. Charitable contributions a | and religious donations | 14. | \$0.00 |
| 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$130.00 15d. Other insurance. Specify: | | ducted from your pay or included in lines 4 or 20. | | |
| 15c. Vehicle insurance | 15a. Life insurance | | 15a | \$0.00 |
| 15d. Other insurance. Specify: | 15b. Health insurance | | 15b | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 15c. Vehicle insurance | | 15c | \$130.00 |
| Specify: | 15d. Other insurance. Specif | fy: | 15d | \$0.00 |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$0.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 \$0.00 20b. Real estate taxes. 20b. \$0.00 20b. Real estate taxes. 20b. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 \$0.00 20d. \$0 | 16. Taxes. Do not include taxes | s deducted from your pay or included in lines 4 or 20. | | |
| 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | Specify: | | 16 | \$0.00 |
| 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | 17. Installment or lease paym | nents: | 10 | |
| 17c. Other. Specify: 17d. Other. Specify: 17d. S0.00 17d. Other. Specify: 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 17a. Car payments for Vehic | le 1 | 17a | \$0.00 |
| 17d. Other. Specify: | 17b. Car payments for Vehic | cle 2 | 17b | \$0.00 |
| 17d. Other. Specify: | 17c. Other. Specify: | | 17c | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20c \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. | | | 17d | \$0.00 |
| 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | | | \$0.00 |
| Specify: | , , , | , | 18. | |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | to support others who do not live with you. | 10 | #0.00 |
| 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | | ses not included in lines 4 or 5 of this form or on Schedule I: Your Income | 19. | \$0.00 |
| 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. Maintenance, repair, and upkeep expenses. | | | 20a | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00 | | | | |
| 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00 | 20c. Property, homeowner's | s, or renter's insurance | | |
| | 20d. Maintenance, repair, an | d upkeep expenses. | | |
| | 20e. Homeowner's associati | ion or condominium dues | | - |

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| Debtor 1 | | | L | McGregory | Case number (if known) | | |
|-------------------|----------|-----------------------------|---------------------|---|------------------------|-----|------------|
| | First Na | ame | Middle Name | Last Name | | | |
| 21. Othe i | r. Spec | ify: | | | | 21 | \$0.00 |
| 00.0-1- | | | | | | | |
| | - | our monthly expenses. | | | | | \$1,647.00 |
| | | es 4 through 21. | | | | | \$0.00 |
| | | ` . | ,, , | from Official Form 106J-2 | | | \$1,647.00 |
| 22c. A | Add line | e 22a and 22b. The resul | | 22. | | | |
| 23. Calc ı | ılate y | our monthly net income |). | | | | |
| 23a. (| Copy lir | ne 12 (your combined me | onthly income) from | Schedule I. | | 23a | \$2,137.33 |
| 23b. (| Сору у | our monthly expenses fro | om line 22 above. | | | 23b | \$1,647.00 |
| 23c. 9 | Subtrac | t your monthly expenses | from your monthly i | ncome. | | | \$490.33 |
| | The res | sult is your monthly net in | icome. | | | 23c | |
| mort | | | | oan within the year or do you nodification to the terms of y | | | |
| | | | | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|---------|--|--|--|
| Debtor 1 | Trena | L | McGregory | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | <u></u> | | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (Otato) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | |
|---|--|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | | |
| | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and | | | | |
| | that they are true and correct. | | | | | |
| × | /s/ Trena McGregory | * | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | |
| | Date 6/6/2018 | Date | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | |

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| Fill i | n this i | information to | identify your o | case: | | | | | |
|----------------|----------------|--------------------|------------------|---------------------|--|-----------------------|-----------------|------------------------|-----------------------------------|
| Deb | tor 1 | Trena | | L | McGr | | | | |
| Deb | tor 2 | First Na | me | Middle | Name Last N | lame | | | |
| (Spo | use, if fili | ing) First Na | me | Middle | Name Last N | lame | | | |
| Unit | ed Stat | tes Bankruptc | y Court for the: | Northern | District of [| linois State) | | | |
| Cas (If knd | e numl own) | ber | | | , | | | | |
| ∩f | fioid | ol Form | 107 | | | | | | Check if this is a amended filing |
| | | al Form | | | | | | | arronded ming |
| _ | | | | | for Individual | | | | 04/1 |
| info | rmatic | on. If more s | pace is neede | ed, attach a sep | narried people are fili parate sheet to this fo | | | | |
| num | ber (if | f known). Ar | swer every q | uestion. | | | | | |
| Par | t 1: (| Give Details | About Your | Marital Status | and Where You Liv | ed Before | | | |
| 1. | Wha | at is your curr | ent marital st | atus? | | | | | |
| | | Married | | | | | | | |
| | ✓ | Not married | | | | | | | |
| 2. | Duri | ing the last 3 | years, have yo | ou lived anywher | e other than where yo | u live now? | | | |
| | ~ | No | | | | | | | |
| | | Yes. List all o | of the places yo | ou lived in the las | st 3 years. Do not includ | de where you live n | OW. | | |
| | | | | | | | | | |
| | | Debtor 1: | | | Dates Debtor 1 live there | d Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | | | | | ш | | | ш |
| | | Number Stree | et | | From | Number Stree | et | | From |
| | | | | | To | | | | То |
| | | City | State | Zip Code | | City | State | Zip Code | |
| | - | | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| | | | | | From | | | | From |
| | | Number Stree | et | | То | Number Stree | et | | To |
| | | | | | | | | | |
| | _ | City | State | Zip Code | | City | State | Zip Code | |
| 3. | | | | | | | | | mmunity property states |
| | | | e Anzona, Califo | omia, iuano, Loui | siana, Nevada, New Mex | ico, Puerto Rico, 162 | xas, vvasningto | יות, מווט vvisconsin.) | |
| | · · | √o os. Make sur | e you fill out S | chedule H: Your | Codebtors (Official Fo | rm 106H). | | | |
| | ш. | oo. Wate oa | o you iii out o | oricadio II. Todi | | 111 10011). | | | |

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McGregory Debtor 1 Trena Case number (if known) First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions and Check all that apply. exclusions) exclusions) Wages, $\overline{\mathbf{A}}$ Wages, \$11232.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$17599.00 For last calendar year: commissions, commissions, (January 1 to December 31, 2017 bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$18435.00 For the calendar year before that: commissions, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips YYYY Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 estimated For the calendar year before that: unemployment \$3,000.00 (January 1 to December 31, 2016

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McGregory Debtor 1 Trena Case number (if known) Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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| tor 1 Trena | L | McC | Gregory | Case number | (if known) |
|----------------------------------|--|---|---|---|--|
| First Name | Middle Name | Last | Name | | |
| | ives; any general partners u are an officer, director, l business you operate as | s; relatives of any g person in control, o | eneral partners; part or owner of 20% or | nerships of which y more of their voting | |
| Yes. List all paymen | its to an insider. | | | | |
| _ | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| Insider's Name | | | | | |
| Number Street | | | | | |
| City Stat | te Zip Code | | | | |
| Insider's Name | | | | | |
| Number Street | | | | | |
| City Stat | te Zip Code | | | | |
| insider? Include payments on deb | | ed by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment |
| | | | | | Include creditor's name |
| Insider's Name | | | | | |
| Number Street | | | | | |
| City Stat | te Zip Code | | | | |
| Insider's Name | | | | | |
| Number Street | | | | | |
| | | | | | |
| City Stat | te Zip Code | | | | |

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Debtor 1 Trena McGregory Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 | Trena | L | McGregory | Case number (if known, |) | |
|-------|----------|---|----------------------------|-----------------------------|------------------------------|--------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | | |
| 11. | | thin 90 days before you fi counts or refuse to make | | | nk or financial institution, | set off any amou | ints from your |
| | ✓ | No Yes. Fill in the details. | | | | | |
| | | l | | Describe the action the | creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | | | | |
| | | | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | | | | |
| 12. | | hin 1 year before you file pointed receiver, a custo | | | ossession of an assignee fo | or the benefit of o | creditors, a court- |
| | <u>~</u> | No | | | | | |
| Part | <u>∟</u> | Yes List Certain Gifts and | l Contributions | | | | |
| · arc | ν | | | | | | |
| 13. | Wi | thin 2 years before you f | iled for bankruptcy, did y | ou give any gifts with a to | tal value of more than \$600 | per person? | |
| | | No Yes. Fill in the details for | or each gift. | | | | |
| | | Gifts with a total value per person | of more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Ga | ave the Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to y | /ou | | | | |
| | | Person to Whom You Ga | ave the Gift | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to y | • | | | | |

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| Debtor 1 | Trena | L | McGregory | Case number (if known |) | |
|----------|--|---|-------------------------------------|---------------------------|-----------------|-------------------|
| | First Name | Middle Name | Last Name | <u> </u> | | |
| | | | | | | |
| 1. Wi | thin 2 years before you f | filed for bankruptcy, did | l you give any gifts or contributio | ns with a total value of | more than \$600 | to any charity? |
| | No | | | | | |
| ✓ | 4 | | | | | |
| | Yes. Fill in the details for | or each gift or contributi | on. | | | |
| | Gifts or contributions | to charities | Describe what you contribu | ted | Date you | Value |
| | that total more than \$ | | 2000 | | contributed | |
| | | | | | | |
| | | | _ | | | |
| | Charity's Name | | | | | |
| | | | _ | | | |
| | | | | | | |
| | Number Street | | - | | | |
| | Number Street | | | | | |
| | City State | e Zip Code | - | | | |
| | City State | e zip code | | | | |
| | | | | | | |
| rt 6: | List Certain Losses | | | | | |
| gai | mbling? No Yes. Fill in the details. | | | | | |
| | 1 co. 1 iii ii 1 ti lo dotalio. | | | | | |
| | Describe the property | - | Describe any insurance cov | | Date of your | Value of property |
| | how the loss occurred | I | Include the amount that insur | | loss | lost |
| | | | pending insurance claims on | ine 33 of <i>Schedule</i> | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | _ | | | | | |
| art 7: | List Certain Paymer | nts or Transfers | | | | |
| | No Yes. Fill in the details. | | | | | |
| | | | | | | |
| | | | Description and value of an | y property | Date payment | Amount of |
| | | | transferred | | or transfer | payment |
| | | | | | was made | |
| | Semrad Law Firm | | Attorney's Fee - 435.00 | | 6/6/2018 | A |
| | Person Who Was Paid | | - | | | \$435.00 |
| | 10 N. Martingale Road | | | | | \$435.00 |
| | Number Street | | - | | | \$435.00 |
| | 0 11 400 | | | | | \$435.00 |
| | Suite 400 | | | | | <u>\$435.00</u> |
| | | | - | | | <u>\$435.00</u> |
| | Schaumbura Illino | Dis 60173 | - | | | <u>\$435.00</u> |
| | Schaumburg Illino | | - - | | | <u>\$435.00</u> |
| | Schaumburg Illino City State | | - - | | | <u>\$435.00</u> |
| | City State | e Zip Code | - - - | | | <u>\$435.00</u> |
| | | e Zip Code | - - - | | | <u>\$435.00</u> |
| | City State Email or website addres | e Zip Code s | - - - | | | <u>\$435.00</u> |
| | City State | e Zip Code s | - - - | | | <u>\$435.00</u> |
| | City State Email or website addres Person Who Made the F | e Zip Code s | - | | | \$435.00 |
| | City State Email or website addres | e Zip Code s | - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid | e Zip Code s | - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F | e Zip Code s | - - - - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid | e Zip Code s | - - - - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid | e Zip Code s | - - - - - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid Number Street | e Zip Code s Payment, if Not You | - - - - - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid | e Zip Code s Payment, if Not You | - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid Number Street City State | e Zip Code s Payment, if Not You e Zip Code | - - - - - - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid Number Street | e Zip Code s Payment, if Not You e Zip Code | - | | | \$435.00 |
| | City State Email or website addres Person Who Made the F Person Who Was Paid Number Street City State | e Zip Code s Payment, if Not You e Zip Code s | - - - - - - | | | \$435.00 |

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| Debtor ³ | 1 Trena | L | McGregory | Case number (if known) | | |
|---------------------|---|-----------------------------|---|-------------------------|-----------------------------------|------------------------------|
| | First Name | Middle Name | Last Name | | | |
| he | Ip you deal with your cre not include any payment | editors or to make paym | | ehalf pay or transfer | any property to a | nyone who promised to |
| Ľ | Yes. Fill in the details. | | | | | |
| L | 1 es. 1 iii ii i ii e detaiis. | | | | | |
| | | | Description and value of any protransferred | operty | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | | | | |
| | Number Street | | | | | |
| | City Stat | e Zip Code | | | | |
| | • | · | | | | |
| Ind | e ordinary course of your clude both outright transfed transfers that you have a No No Yes. Fill in the details. | ers and transfers made as s | security (such as the granting of a secu | rity interest or mortga | ge on your propert | /). Do not include gifts |
| _ | | | Description and value of proper transferred | | ceived or debts pa | Date transfer was made |
| | Person Who Received T | Fransfer | | | | |
| | Number Street | | | | | |
| | City Stat Person's relationship to | ' | | | | |
| | Person Who Received T | Fransfer | | | | |
| | Number Street | | | | | |
| | City Stat Person's relationship to | ' | | | | |
| be | thin 10 years before you neficiary? nese are often called asset- | | d you transfer any property to a self | -settled trust or sim | ilar device of whic | ch you are a |
| <u> </u> | 4 | | | | | |
| L | Yes. Fill in the details. | | Description and value of the p | roperty transferred | | Date transfer was made |
| | Name of trust | | | | | |

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Debtor 1 Trena L McGregory Case number (if known)
First Name Middle Name Last Name

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

| | | | | nents, oare Deposit | | | | |
|-----|--------------|--|----------------------|--|-------------|---------------------------------------|--|--|
| 20. | mov Inclu | nin 1 year before you filed f red, or transferred? ude checking, savings, mone peratives, associations, and o | y market, or other f | nancial accounts; certific | | _ | | |
| | ✓ | No Yes. Fill in the details. | | | | | | |
| | _ | | | Last 4 digits of account of accou | count | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | | Person Who Was Paid | | XXXX- | | Checking | | |
| | | Number Street | | | | Savings Money market | | |
| | | | | | | Brokerage | | |
| | | City State | Zip Code | | | Other | | |
| | - | | _р | XXXX- | | Checking | | |
| | | Person Who Was Paid | | | | Savings | | |
| | | Number Street | | | | Money market | | |
| | | | | | | Brokerage | | |
| | | City State | Zip Code | | | Other | | |
| 21. | othe | vou now have, or did you haver valuables? No Yes. Fill in the details. | ave within 1 year b | efore you filed for ban Who else had access | | p safe deposit box or of Describe the | | Do you still |
| | | | | | | | | have it? |
| | | Name of Financial Institution | 1 | Name | | | | ☐ Yes |
| | | Number Street | | Number Street | | | | |
| | | | | City State | Zip Co | ode | | |
| | | City State | Zip Code | | | | | |
| 22. | | e you stored property in a s No Yes. Fill in the details. | storage unit or pla | ce other than your ho | me within 1 | year before you filed fo | or bankruptcy? | |
| | | | | Who else had access | to it? | Describe the | e contents | Do you still have it? |
| | | Name of Storage Facility | | Name | | | | No |
| | | Number Street | | Number Street | | | | Yes |
| | | | | City State | Zip Co | ode | | |
| | | City State | Zip Code | | | | | |

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Debtor 1 Trena McGregory Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code City State Zip Code

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| Deb | tor 1 | | <u> </u> | - Aldella Nierra | McGregory | Case n | number <i>(if kn</i> e | own) | | |
|------|---|---------------------------------|-----------------|--------------------------------|-----------------------------|----------------------------------|------------------------|---------------------------------|---------------|---------------|
| | | First Name | | Middle Name | Last Name | | | | | |
| 26. | 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | S. | | |
| | Y | No Yes. Fill in the details. | | | | | | | | |
| | Ч | 100.1 111 1110 000 | ano. | | Court or agency | | Nature of t | he case | | Status of the |
| | | Case title | | | | | | | | case |
| | | | | | Court Name | | | | | Pending |
| | | Case number | | | NumberStreet | | | | | On appeal |
| | | | | ī | City State | Zip Code | | | | Concluded |
| Part | art 11: Give Details About Your Business or Connections to Any Business | | | | | | | | | |
| 27. | Witl | hin 4 years before | you filed for b | oankruptcy, did | l you own a business or | have any of the fol | llowing con | nections to ar | ny business? | |
| | | | | - | ade, profession, or othe | - | -time or par | t-time | | |
| | | A member of A partner in a | | lity company (L | LC) or limited liability pa | artnership (LLP) | | | | |
| | | ш · | | naging executiv | e of a corporation | | | | | |
| | | An owner of | at least 5% of | the voting or e | quity securities of a cor | poration | | | | |
| | ✓ | No. None of the a | | | | | | | | |
| | Ш | res. Check all the | агарріу ароу | e and IIII in the (| details below for each l | ousiness. ure of the business | · 1 | Employer Iden | tification nu | mber Do not |
| | | | | | | | | nclude Social | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | Name of accountant or bookkeep | | Dates business existed | | s existed | | |
| | | City | State | Zip Code | | ant of bookkeeper | | From | То | |
| | | | | | | | | | | |
| | | | | | Describe the nat | ure of the business | | Employer Iden | tification nu | mber Do not |
| | | | | | | | i | nclude Social | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of account | ant or bookkeeper | | Dates busines | s existed | |
| | | City | State | Zip Code | — | ant of bookkeeper | | From | To | |
| | | | | | | | | | | |
| | | | | | D | | | F l | | |
| | | | | | Describe the nat | ure of the business | | Employer Iden include Social | | |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | _ | | | Dates busines | s existed | |
| | | City | State | Zip Code | Name of account | ant or bookkeeper | | From | То | |
| | | | | | | | | | | |
| | | | | | | | | | | |

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| Deb | tor 1 | Trena | L | McGregory | Case number (if known) |
|------|--------|---|--------------------------|-------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | | hin 2 years before you filed fo ditors, or other parties. No Yes. Fill in the details below. | | give a financial statement to | anyone about your business? Include all financial institutions, |
| | | | | Date issued | |
| | | | | MM/DD/YYYY | |
| | | Name | | MIM/DD/ T T T T | |
| | | Number Street | | | |
| | | | | | |
| | | City State | Zip Code | | |
| Pari | 12: | Sign Below | | | |
| 1 | true a | and correct. I understand tha | at making a false stater | nent, concealing property, c | and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Trena McG | 0 7 | | |
| | | Signature of Debto | or 1 | | Signature of Debtor 2 |
| | | Date 6/6/2018 | | | Date |
| I | Did ye | | | | s Filing for Bankruptcy (Official Form 107)? ruptcy forms? |
| | Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Dis | trict of Illinois | | | | | |
|------|--|---|-------------------------------------|---------------------------------|--|--|--|--|
| n re | Trena L McGregory | | Case No. | | | | | |
| | Debtor | | | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF | COMPENSATI | ON OF ATTORNEY | FOR DEBTOR | | | | |
| 1. | 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for servi rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as for | | | | | | | |
| | For legal services, I have agreed to ac | cept | | \$4,000.00 | | | | |
| | Prior to the filing of this statement I h | nave received | | \$435.00 | | | | |
| | Balance Due | | | \$3,565.00 | | | | |
| 2. | The source of the compensation paid | I to me was: | | | | | | |
| | ✓ Debtor | Other (spec | fy) | | | | | |
| 3. | The source of the compensation paid | I to me is: | | | | | | |
| | ✓ Debtor | Other (spec | fy) | | | | | |
| 4. | I have not agreed to share the ab members and associates of my la | | tion with any other person unless | they are | | | | |
| | I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. | | | | | | | |
| 5. | | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | |
| | b. Preparation and filing of any p | petition, schedules, state | ments of affairs and plan which m | ay be required; | | | | |
| | c. Representation of the debtor | at the meeting of creditor | rs and confirmation hearing, and a | any adjourned hearings thereof; | | | | |
| | d. Representation of the debtor | in adversary proceedings | and other contested bankruptcy | matters; | | | | |
| 6. | By agreement with the debtor(s), the | above-disclosed fee does | s not include the following service | s: | | | | |
| | | | | | | | | |
| | | CERTIF | FICATION | | | | | |
| | certify that the foregoing is a complet or(s) in this bankruptcy proceedings. | e statement of any agree | ment or arrangement for payment | to me for representation of the | | | | |
| | 6/6/2018 /s/ Yisroel Y Moskovits | | | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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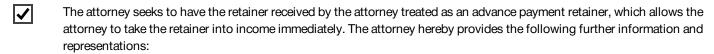
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$343.47
- 3. Before signing this agreement, the attorney has received, \$435.00 toward the flat fee, leaving a balance due of \$3,565.00; and \$33.47 for expenses, leaving a balance due of \$3,908.47
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 6/6/2018 | |
|----------|-------------|-------------------------|
| Signed: | | |
| /s/ Tren | a McGregory | |
| | | /s/ Yisroel Y Moskovits |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | McGregory, Trena L | Case No | Case No | | |
|-------------|--|--|-------------------------------------|--|--|
| Debtor(s) | | Chapter. | Chapter13 | | |
| | | ATION OF CREDITOR MAT | | | |
| knowledge | ne above named Debtors hereby verify e. | that the attached list of creditors is tru | ue and correct to the best of their | | |
| Date: | 6/6/2018 | /s/ McGregory, T | rena L | | |
| | | McGregory, Tren Signature of Deb | | | |

NORDSTM/TD PO Box 6565 Englewood, CO, 80155

TARGET/TD PO BOX 673 MINNEAPOLIS, MN, 55440

NW COLLECTOR 3601 ALGONQUIN RD SUITE 232 ROLLING MEADOW, IL, 60008

CB/MARATHON PO BOX 182789 COLUMBUS, OH, 43218

ONEMAIN P.O. Box 742536 Cincinnati, OH, 45274

KOHLS/CAPONE PO BOX 3115 MILWAUKEE, WI, 53201

SYNCB/AMAZON PO BOX 965015 ORLANDO, FL, 32896

SYNCB/WALMAR PO BOX 965024 EL PASO, TX, 79998

BRCLYSBANKDE PO BOX 26182 WILMINGTON, DE, 19899

Carmax Auto Finance 225 Chastain Meadows Ct Nw Ste 210 Attn: Bankruptcy Dept Kennesaw, GA, 30144

Illinois Tollway PO Box 5544 Chicago, IL, 60680 Midland Funding Po Box 939069 San Diego, CA, 92193

City of Chicago - Dept. of Finance 333 S State Street, Suite 330 Chicago, IL, 60604

Arnold Scott Harris P.C 111 W Jackson Blvd Ste 600 c/o Frank Suda Chicago, IL, 60604

PORTFOLIO RECOVERY ASS 140 Corporate Blvd Norfolk, VA, 23502

Capital One Bank Po Box 30285 Salt Lake Cty, UT, 84130

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Quantum 3 Group LLC as agent for MOMA Funding LLC PO Box 788 Attn: Steven G. Kane Kirkland, WA, 98083

Nicor Gas Po Box 549 Aurora, IL, 60507

TCF Bank 601 W 14th Street Chicago Heights, IL, 60411

The City of Berwyn 6700 26th St Berwyn, IL, 60402

Village of Melrose Park 1 N. Broadway Melrose Park, IL, 60160 Case 18-16248 Doc 1 Filed 06/06/18 Entered 06/06/18 16:01:09 Desc Main Document Page 67 of 79

City of Rolling Meadows 3600 Kirchoff Road Rolling Meadows, IL, 60008

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

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The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

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- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

1

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$343.47
- 3. Before signing this agreement, the attorney has received, \$435.00 toward the flat fee, leaving a balance due of \$3,565.00; and \$33.47 for expenses, leaving a balance due of \$3,908.47
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Attorney for Debtor

| Date: | 6/6/2018 |
|-------|----------|
| | |

Signed:

/s/ Tyena McGregory

Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

Local Bankruptcy Form 23c

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Trena L McGregory,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be <u>\$490.00</u> at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of **\$4,000.00**, with an initial down payment of **\$435.00**.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 5% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$415.00/mo.
- 3. Carmax Auto Finance will be paid 14,409.73 at 6% APR at a fixed monthly payment of \$50.00/mo until Firm's Fees are paid.
- 4. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.

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THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Accepted:

Date: 6/6/2018

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| Debtor 1 Trena | L | McGregory | Case number (if known, | | | | |
|--|--|---|--|--|--|--|--|
| First Name | Middle Name | Last Name | | | | | |
| | estions for Reporting Purpose | ly consumer debts? | <i>Consumer debts</i> are d | efined in 11 U.S.C. § 101(8) as | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available | expenses are paid that | er 7. Do vou estimate th | nat after any exempt prop to distribute to unsecure | perty is excluded and administrative and creditors? | | | |
| for distribution to unsecured creditors? | | | | emintelikki (1884) kulon en 1988 (1984) kulon | | | |
| 18. How many creditors do you estimate that you owe? | ☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,0 5,001-10 10,001-2 | ,000 5,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000, \$50,000, | 01-\$10 million 001-\$50 million 001-\$100 million),001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$10,000,i \$50,000,i | 01-\$10 million 001-\$50 million 001-\$100 million 0,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | |
| Part 7: Sign Below | | II de aleman de se | analty of pariun, that th | ne information provided is true and | | | |
| For you | correct. If I have chosen to file under Conference of title 11, United States Code under Chapter 7. If no attorney represents me an out this document, I have obtained the conference of the c | Chapter 7, I am aware e. I understand the rel and I did not pay or agained and read the nowith the chapter of titicatement, concealing a case can result in fin | that I may proceed, if e lief available under each line to pay someone what lice required by 11 U.S. lie 11, United States Coproperty, or obtaining es up to \$250,000, or it | eligible, under Chapter 7, 11,12, or 13 h chapter, and I choose to proceed ho is not an attorney to help me fill S.C. § 342(b). Ode, specified in this petition. money or property by fraud in imprisonment for up to 20 years, or | | | |
| | Signature of Debtor 1 Executed on 6/6/2018 MM / D | DD / YYYY | Signature of D Executed or | | | | |

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| | | | | · |
|---------------------------------|---------------------------------------|------------------------------|--------------------------------|---|
| Fill in this infor | mation to identify you | r case: | | |
| Debtor 1 | Trena First Name | L Middle Name | McGregory Last Name | _ |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | _ |
| United States E | Bankruptcy Court for th | e: Northern | District of Illinois (State) | _ |
| Case number (if known) | | | (otalo) | |
| Official | Form 106D |)ec | | Check if this is a amended filing |
| | | | tor's Schedules | 12/1 |
| U.S.C. §§ 152, | 1341, 1519, and 3571 | | ney to help you fill out bankı | 3250,000, or imprisonment for up to 20 years, or both. 18 |
| ☑ No | ay or agree to pay so Name of person | meone who is NOT an attor | | etition Preparer's Notice, Declaration, and |
| that they | are true and correct McGregory | lare that I have read the su | mary and schedules filed w | of Debtor 2 |

Date

MM/DD/YYYY

1M

Date 6/6/2018

MM/DD/YYYY

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| Debtor 1 Tr | rena | | L | McGregory | Case number (if known) | |
|-------------------------|--|---------------|--------------------|--|--|------------------------|
| | irst Name | | Middle Name | Last Name | and the second s | |
| credit | n 2 years before tors, or other par No Yes. Fill in the det | rties. | bankruptcy, did y | ou give a financial state Date issued | ement to anyone about your business? Include all | financial institutions |
| _ | | | | MM/DD/YYYY | | |
| Ì | Name | | | WINDO/TTTT | | |
| i | Number Street | | | _ | | |
| - | | 04-1- | Zin Codo | _ | | |
| i | City | State | Zip Code | | | |
| Part 12: 8 | Sign Below | | | | | |
| a bankr | y /s/ Signati | Trena McGree | s up to \$750,000, | or imprisonment for up | pperty, or obtaining money or property by fraud in to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 Signature of Debtor 2 Date | 9, and 35/1. |
| | | | | | | . |
| Did you | ı attach addition | al pages to \ | our Statement of | Financial Affairs for In- | dividuals Filing for Bankruptcy (Official Form 107) | ? |
| Did you No Yes | , | al pages to \ | our Statement of | Financial Affairs for Inc | dividuals Filing for Bankruptcy (Official Form 107) | ? |
| ✓ No Yes | s | | | Financial Affairs for Ind | | • |
| ✓ No Yes Did you ✓ No | s u pay or agree to | pay someon | | | | Notice, |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | McGregory, Trena L Debtor(s) | Case No | | |
|-----------------|-------------------------------|---|------------------------------------|---|
| | | Chapter. | Chapter13 | |
| | VERIFI | CATION OF CREDITOR MATE | RIX | |
| Ti knowledge | | fy that the attached list of creditors is true | e and correct to the best of their | |
| Date: | 6/6/2018 | /s/McGregory, Tre McGregory, Trena Signature of Debto | L Property | / |

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| Debto | or 1 Trena | L | McGregory | Case number (if known) | | | | | |
|---|---|---|------------------------------|--|-----------------------------|--|--|--|--|
| DCDI | First Name | Middle Name | Last Name | a minimum state of the contract of the contrac | weeks and the second second | | | | |
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | | | | |
| | 16a. Fill in the state in wh | rich you live. | Illinois | | | | | | |
| | 16b. Fill in the number of | people in your household. | 1 | | \$52,410.00 | | | | |
| | ha cabald | nily income for your state and s led in the separate instructions f | To find a | list of applicable median income amounts, go online also be available at the bankruptcy clerk's office. | | | | | |
| 17. | How do the lines compa | ire? | | | , | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | | | |
| | ₩ U.S.C. & 1325(I | re than line 16c. On the top of p b)(3). Go to Part 3 and fill out r current monthly income from I | Calculation of Disposal | box 2, <i>Disposable income is determined under 11</i> ble Income (Official Form 122C-2). On line 39 of th | at | | | | |
| Part | Calculate Your Co | mmitment Period Under | 11 U.S.C. §1325(b)(4 | 4) | | | | | |
| 18 | Copy your total average | monthly income from line 11 | | | \$2,045.33 | | | | |
| 19. | | | married your shouse is r | not filing with you, and you contend that calculating to ar spouse's income, copy the amount from line 13. | | | | | |
| | | nent does not apply, fill in 0 on | | | - <u>\$0.00</u> | | | | |
| | 19b. Subtract line 19a fi | | | | \$2,045.33 | | | | |
| 20. | | monthly income for the year. | Follow these steps: | | 00.045.00 | | | | |
| | 20a. Copy line 19b. | | 10 miles | and the second of the second o | \$2,045.33 | | | | |
| | Multiply by 12 (the n | number of months in a year). | | | x 12 | | | | |
| | 20b. The result is your cu | rrent monthly income for the ye | ar for this part of the form | | \$24,543.96 | | | | |
| | 20c. Copy the median far | mily income for your state and s | ize of household from line | e 16c. | \$52,410.00 | | | | |
| 21. | How do the lines compa | low do the lines compare? | | | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | | | | |
| | Line 20b is more than 4, The commitment µ | n or equal to line 20c. Unless ot period is 5 years. Go to Part 4. | herwise ordered by the co | ourt, on the top of page 1 of this form, check box | | | | | |
| Part - | 4: Sign Below | | | | | | | | |
| | | 1 . | at the information on this | statement and in any attachments is true and correct. | | | | | |
| | Signature of Debt | | Sign | gnature of Debtor 2 | | | | | |
| | Date 6/6/2018 MM/DD/Y | ~~ | Da | MM/DD/YYYY | | | | | |
| If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | | | | |